| | Case | 22-10822-JDW Doc | 2 Filed 04/14/22 Entered 04/1 Document Page 1 of 6 | .4/22 15:07:16 - | Desc Main | | | |
|----------------------|-----------|---|---|----------------------|---|--|--|--|
| Fill in the Debtor 1 | | nation to identify your case: Pamela Foster | | | | | | |
| Debtor 2 (Spouse, | | Full Name (First, Middle, Last) Full Name (First, Middle, Last) | | | | | | |
| United S | States Ba | nkruptcy Court for the | NORTHERN DISTRICT OF MISSISSIPPI | | his is an amended plan, and the sections of the plan that | | | |
| Case nui | | | | | have been changed. | | | |
| Chapt | er 13 I | Plan and Motions for V | aluation and Lien Avoidance | - | 12/17 | | | |
| Part 1: | Notice | s | | | | | | |
| Fo Debte | ors: | indicate that the option is ap | nat may be appropriate in some cases, but the propriate in your circumstances or that it is peres and judicial rulings may not be confirmable. In this plan. | rmissible in your ju | dicial district. Plans that | | | |
| | | In the following notice to cred | itors, you must check each box that applies | | | | | |
| Γο Credi | itors: | Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated. | | | | | | |
| | | You should read this plan care an attorney, you may wish to o | fully and discuss it with your attorney if you have consult one. | one in this bankrupt | ccy case. If you do not have | | | |
| | | to confirmation on or before | tment of your claim or any provision of this pla the objection deadline announced in Part 9 of t inkruptcy Court may confirm this plan without a 3015. | the Notice of Chapt | er 13 Bankruptcy Case | | | |
| | | The plan does not allow claim | s. Creditors must file a proof of claim to be paid u | nder any plan that m | ay be confirmed. | | | |
| | | | of particular importance. Debtors must check on owing items. If an item is checked as "Not Incluif set out later in the plan. | | | | | |
| 1.1 | | on the amount of a secured cla al payment or no payment at al | nim, set out in Section 3.2, which may result in | ☐ Included | ✓ Not Included | | | |
| 1.2 | Avoida | | sessory, nonpurchase-money security interest, | ✓ Included | ☐ Not Included | | | |
| 1.3 | | ndard provisions, set out in Par | rt 8. | ✓ Included | ☐ Not Included | | | |
| Part 2: | Plan P | ayments and Length of Plan | | | , | | | |
| 2.1 | Length | of Plan. | | | | | | |
| | n 60 moi | nths of payments are specified, a | nonths, not to be less than 36 months or less than 6 dditional monthly payments will be made to the ex | | | | | |
| 2.2 | Debtor | (s) will make payments to the t | rustee as follows: | | | | | |

Debtor shall pay ___\$564.00 (___ monthly, ___ semi-monthly, ___ weekly, or ___/ bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the court, an Order directing payment shall be issued to the debtor's employer at the following address:

Baptist Home Care & Hospice

901 Hugh Wallis Rd S Lafayette LA 70508-0000

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| Debtor | - | Pamela | Foster | | | Case number | |
|----------------------------------|--|--|--|---|----------------------------|--|---|
| Joint Del court, an | | | (monthly, semi-repayment shall be issued to | | | | er 13 trustee. Unless otherwise ordered by th |
| | | | | | | | |
| 2.3 | Incom | e tax ret | urns/refunds. | | | | |
| | Check √ | all that a Debto | pply r(s) will retain any exempt | income tax refunds rec | eived durii | ng the plan term | |
| | | | r(s) will supply the trustee and will turn over to the tr | | | | the plan term within 14 days of filing the during the plan term. |
| | | Debto | r(s) will treat income refun | ds as follows: | | | |
| | _ | payments | ; . | | | | |
| Chec | rk one. | None. | If "None" is checked, the | rest of § 2.4 need not b | e complete | d or reproduced | |
| Part 3: | Treat | ment of | Secured Claims | | | | |
| |) Prin 1322 clair Mtg pm | acipal Res 2(b)(5) sh n filed by | all be scheduled below. At the mortgage creditor, sub anderbilt Mortgage | ng term secured debt wasent an objection by a | hich is to b | e maintained ar erest, the plan w uing monthly m | d cured under the plan pursuant to 11 U.S.C. will be amended consistent with the proof of ortgage payment proposed herein. |
| 1 | Mtg arre | ears to | Vanderbilt Mortgage | Thro | ugh _l | May 2022 | \$48.17/mon |
| 3.1(b) Property Mtg pm | ti h y -NO addr | J.S.C. § 1 he proof of erein. NE- | 322(b)(5) shall be scheduled of claim filed by the mortga | ed below. Absent an ob | jection by the start da | a party in intere | tained and cured under the plan pursuant to 1 st, the plan will be amended consistent with uing monthly mortgage payment proposed |
| Beginni | ng mo | nth | @ | · | Plan | Direct. | Includes escrow Yes No |
| Property | y -NON | E- Mtg | arrears to | Throug | h | | |
| 3.1(c) | | | claims to be paid in full with the proof of claim file | - | | jection by a par | ty in interest, the plan will be amended |
| Creditor | r: -N 0 | ONE- | Approx. | amt. due: | | Int. Rate*: | |
| (as state Portion (Equal t | al Balanded in Par of claim to Total | ce to be pert 2 of the new to be part less or taxes/ir | Principal Balance) | Attachment) -NONE- /m | | | |
| (as state | ed in Par | t 4 of the | Mortgage Proof of Claim | Attachment) | | | |

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| Debtor Pamela Foster Case number |
|----------------------------------|
|----------------------------------|

- 3.2 Motion for valuation of security, payment of fully secured claims, and modification of undersecured claims. Check one..
 - **None.** *If "None" is checked, the rest of § 3.2 need not be completed or reproduced.*
- 3.3 Secured claims excluded from 11 U.S.C. § 506.

Check one.

None. If "None" is checked, the rest of § 3.3 need not be completed or reproduced.

The claims listed below were either:

- (1) incurred within 910 days before the petition date and secured by a purchase money security interest in a motor vehicle acquired for the personal use of the debtor(s), or
- (2) incurred within 1 year of the petition date and secured by a purchase money security interest in any other thing of value.

These claims will be paid in full under the plan with interest at the rate stated below. Unless otherwise ordered by the court, the claim amount stated on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) controls over any contrary amount listed below. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling.

| Name of Creditor | Collateral | Amount of claim | Interest rate* |
|------------------------|------------------------------------|-----------------|----------------|
| Santander Consumer USA | 2019 Hyundai Santa Fe 99,000 miles | \$24,000.00 | **See Part 8.1 |

^{*}Unless otherwise ordered by the court, the interest rate shall be the current Till rate in this District.

Insert additional claims as needed.

3.4 Motion to avoid lien pursuant to 11 U.S.C. § 522.

Check one.

1

None. If "None" is checked, the rest of § 3.4 need not be completed or reproduced.

The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.

The judicial liens or nonpossessory, nonpurchase money security interests securing the claims listed below impair exemptions to which the debtor(s) would have been entitled under 11 U.S.C. § 522(b). Unless otherwise ordered by the court, a judicial lien or security interest securing a claim listed below will be avoided to the extent that it impairs such exemptions upon entry of the order confirming the plan unless the creditor files an objection on or before the objection deadline announced in Part 9 of the Notice of Chapter 13 Bankruptcy Case (Official Form 309I). Debtor(s) hereby move(s) the court to find the amount of the judicial lien or security interest that is avoided will be treated as an unsecured claim in Part 5 to the extent allowed. The amount, if any, of the judicial lien or security interest that is not avoided will be paid in full as a secured claim under the plan. See 11 U.S.C. § 522(f) and Bankruptcy Rule 4003(d). If more than one lien is to be avoided, provide the information separately for each lien.

| Name of creditor | Property subject to lien | Lien amount to be avoided | Secured amount remaining | Type of lien | Lien identification (county, court, judgment date, date of lien recording, county, court, book and page number) |
|---------------------------|--|---------------------------|--------------------------|---------------------------------|--|
| 1st Franklin Financial | 50" Element tv (\$250), 3 x 43" Sony TVs (\$150 each), murray mower (\$0-broken) | \$700 | \$0 | Agreement,UCC | UCC #: 20203201377 |
| First Heritage Credit | 50" Element TV (\$250), John Deere Mower (\$500), John Deere push mower (\$75), Milwaukee weed eater (\$75) | \$900.00 | \$0 | Agreement,UCC | UCC #: 20213633433A |
| First Tower Loan, LLC | Exercise bike (\$50), John Deere mower | \$540 | \$0 | Agreement,Certific ate of Title | UCC #: 20223765143A |

^{*} Unless otherwise ordered by the court, the interest rate shall be the curent Till rate in this District *Insert additional claims as needed.*

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| Debtor | Pame | la Foster | | Case number | er | |
|-----------|-----------------------------|--|---|---------------------------|------------------------|--|
| Nam | e of creditor | Property subject to lien (\$500), power drill | Lien amount to be avoided | Secured amount remaining | Type of lien | Lien identification (county, court, judgment date, date of lien recording, county, court, book and page number) |
| | | (\$100), hedge trimmer (\$15), leaf blower (\$50), Pressure Washer (\$75), air compressor (\$100), PS4 (\$150) | | | | |
| Insert ad | lditional claims | as needed. | | | | |
| 3.5 | Surrender of | collateral. | | | | |
| | Check one. ✓ Non | e. If "None" is checked, t | the rest of § 3.5 need not b | e completed or reproduce | d. | |
| Part 4: | Treatment o | f Fees and Priority Clai | ms | | | |
| 4.1 | | and all allowed priority of | claims, including domestic | support obligations other | than those treated in | § 4.5, will be paid in full |
| 1.2 | Trustee's fees | | and may change during the | e course of the case. | | |
| 4.3 | Attorney's fe | es. | | | | |
| | ✓ No look fe | e: 3,600.00 | | | | |
| | Total atto | rney fee charged: | \$3,600.00 | | | |
| | Attorney | fee previously paid: | \$387.00 | | | |
| | | fee to be paid in plan per tion order: | \$3,213.00 | | | |
| | ☐ Hourly fee | : \$ (Subject to app | roval of Fee Application.) | | | |
| 4.4 | Priority clain | ns other than attorney's | fees and those treated in | ı § 4.5. | | |
| | Check one. ✓ Non | e. If "None" is checked, t | he rest of § 4.4 need not b | e completed or reproduced | d. | |
| 4.5 | Domestic sup | port obligations. | | | | |
| | ✓ Non | e. If "None" is checked, t | the rest of § 4.5 need not b | e completed or reproduce | d. | |
| Part 5: | Treatment o | f Nonpriority Unsecure | d Claims | | | |
| 5.1 | Nonpriority u | insecured claims not sep | parately classified. | | | |
| / | providing the The sum of | largest payment will be es | that are not separately class ffective. <i>Check all that ap</i> | ply. | a. If more than one of | ption is checked, the optio |
| | % of t | he total amount of these c | elaims, an estimated paymo | ent of \$ | | |
| | | | Micc | issinni Chanter 13 Plan | | Page 4 |

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| Debtor | Pamela Foster | Case number |
|------------------------------------|--|---|
| | The funds remaining after disbursements have be | en made to all other creditors provided for in this plan. |
| | | or chapter 7, nonpriority unsecured claims would be paid approximately \$0.00 nts on allowed nonpriority unsecured claims will be made in at least this amount. |
| 5.2 | Other separately classified nonpriority unsecure | ed claims (special claimants). Check one. |
| | None. If "None" is checked, the rest of § | 5.3 need not be completed or reproduced. |
| Part 6: | Executory Contracts and Unexpired Leases | |
| 5.1 | The executory contracts and unexpired leases list contracts and unexpired leases are rejected. Che | sted below are assumed and will be treated as specified. All other executory ck one. |
| | None. If "None" is checked, the rest of § | 6.1 need not be completed or reproduced. |
| Part 7: | Vesting of Property of the Estate | |
| 7.1 | Property of the estate will vest in the debtor(s) u | pon entry of discharge. |
| Part 8: | Nonstandard Plan Provisions | |
| Part 9: | Under Bankruptcy Rule 3015(c), nons provision not otherwise included in the this plan are ineffective. The following plan provisions will k 1. Absent an objection, andy Proof of C paid in full at any applicable statutor 2. Upon the filing of a Notice of Postpe within 30 days after the filing of said special claim over the remaining plan 3. If applicable, all ad valorem taxes, putaxing authority by the Debtor and no | standard provisions must be set forth below. A nonstandard provision is a cofficial Form or deviating from it. Nonstandard provisions set out elsewhere in the effective only if there is a check in the box "Included" in § 1.3: Claim filed by the Internal Revenue Service and/or MDOR (priority/secured) shall be yrate of interest. Settition Mortgage Fees, Expenses, and Charges, and absent any objection being filed I Notice, the Trustee is authorized to pay the amount contained in the Notice as a in term and adjust the plan payment accordingly. |
| complete X /s/ Pa Sig Ex 57 Ad Wa | Signatures of Debtor(s) and Debtor(s)' Attorney tor(s) and attorney for the Debtor(s), if any, must sign address and telephone number. Pamela Foster mela Foster mature of Debtor 1 ecuted on April 8, 2022 78 Hwy 7 South dress atterford MS 38685-0000 y, State, and Zip Code | n below. If the Debtor(s) do not have an attorney, the Debtor(s) must provide their X Signature of Debtor 2 Executed on Address City, State, and Zip Code |
| Te | lephone Number | Telephone Number |

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| De | ebtor | Pamela Foster | Case number | |
|----|----------|-----------------------------|---------------------------|--|
| X | /s/ Rob | ert H. Lomenick | Date April 8, 2022 | |
| | Robert | H. Lomenick 104186 | | |
| | Signatur | e of Attorney for Debtor(s) | | |
| | 126 No | rth Spring Street | | |
| | Post Of | fice Box 417 | | |
| | Holly S | prings, MS 38635 | | |
| | Address, | City, State, and Zip Code | | |
| | 662-252 | 2-3224 | 104186 MS | |
| | Telephor | ne Number | MS Bar Number | |
| | rlomeni | ick@gmail.com | | |
| | Email A | ddress | | |